

# A Quiet Pioneer—An Interview with A. Paul Kelly, MD, Editor in Chief Emeritus, *Journal of the National Medical Association*

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**Key words:** King/Drew Medical Center ■ dermatology ■ medical school ■ medical care

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Dr. A. Paul Kelly recently announced his retirement as editor in chief of the *Journal of the National Medical Association (JNMA)*, a position he has held since 1997.

He is a 30-year member of the medical staff and director of the dermatology training program at the Martin Luther King Hospital, the King/Drew Medical Center, and the Charles R. Drew University of Medicine and Science in Los Angeles.

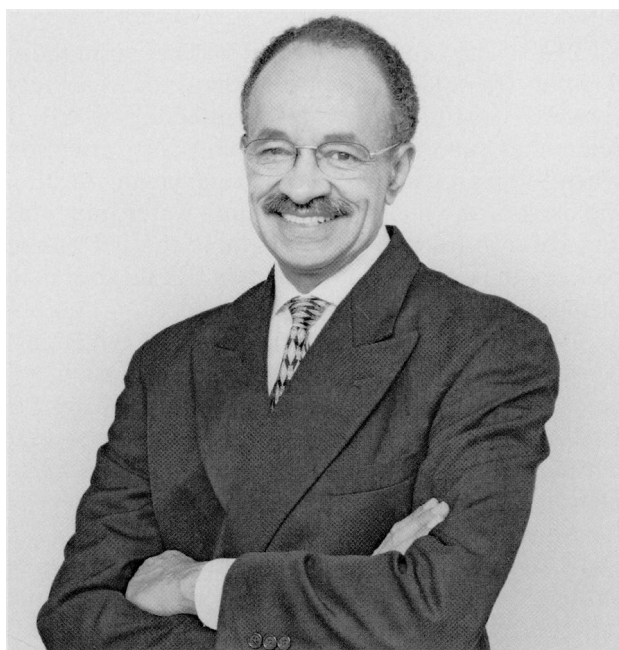
Born in 1938 in Asheville, NC, he is the son and grandson of physicians. He attended high school in Morristown, NJ, did his undergraduate work at Brown University, and completed his medical training at Howard University in 1965. He has been married for 38 years to Beverly Baker-Kelly, a law professor and human rights advocate. They have two lovely daughters and one vivacious granddaughter.

The following interview was conducted in the spring of 2004 by Dr. George Dawson, editor of the History, Health Tidbits, and Art in Medicine sections of *JNMA*.

**DAWSON:** Tell us about your educational background.

**KELLY:** I went to elementary school in Talledega, AL, where my father was the physician at the college. Talledega College was an integrated oasis in a highly charged, segregated society. Moving to Morristown, NJ, where I attended high school, allowed me to expand my horizons and more fully participate in an integrated society.

In high school, I was a typical teenager who loved sports. I became captain of the track team and played first string varsity basketball. I enjoyed my



share of parties, dancing, and socializing with my peers. But I also had fun learning; math and history were my favorite subjects.

At Brown University I enjoyed the freedom of choosing my own courses because there was not a defined premed curriculum. I was able to explore the world of ideas and reasoning through classes in philosophy and the classics, as well as the sciences. I majored in human biology, which was a combination of anthropology, biology, sociology, and psychology.

I was one of only three African-American students in my class at Brown, so Howard University Medical School was quite a social change for me. The friendships that I formed in medical school have proven to be long lasting. At Howard, I studied under a number of world-class professors, such as Dr. Walter Lester Henry, Dr. John Clark, and Dr. LaSalle Lafall. It was a time of personal growth and pruning for me.

**DAWSON:** Why did you decide to specialize in dermatology?

KELLY: I was in my third-year medical school clinical rotations when I heard a lecture on dermatology by Dr. John Kenney, a new faculty member. He was an excellent teacher and inspired not only me but also six of my classmates to choose dermatology as our area of specialization. I recall vividly when Dr. Kenney told us, "Close your eyes and stick a pin in a map of the USA. Wherever the pin lands, you can go there and probably be the only black dermatologist."

*DAWSON: You were in Howard Medical School at the time of the Civil Rights Movement. What impact did that have on your life?*

KELLY: "The Movement," as it was called in those days, was a cataclysmic event that moved society forward. Institutional racism affected us all. I remember experiencing demeaning discrimination when I was growing up in Talledega: having to sit in the back of the bus, using separate water fountains and bathrooms, and not being able to visit public parks or to be served in restaurants. All this began to change as America changed its attitudes.

I was definitely a beneficiary of the Civil Rights Movement and the opportunities it afforded people of color. It enabled me to achieve many firsts. I was the first African-American physician to do a three-year dermatology residency at Henry Ford Hospital in Detroit, and the first African-American president of the American Dermatological Association, the Pacific Dermatologic Association, and the Association of Professors of Dermatology. These honors would not have been available to me had it not been for courageous people who put their lives on the line to win freedom and equality for all of us. It was also at this time, as a result of the Watts Riots in Los Angeles, that the King/Drew Medical Center, where I have been employed for the past 30 years, was built.

*DAWSON: The Vietnam War was also in progress while you were in medical school. How did it affect your life?*

KELLY: Our entire society was affected by this war. For me, the most important effect was that on graduating from medical school in 1965 and getting married the next year, I was drafted into the Army and commissioned a captain. I was in Vietnam for a one-year tour of duty, serving as a public health officer in a Civil Affairs unit. I saw firsthand the standard of living in a third world country. I also witnessed the daily hardships of both our troops and the Vietnamese because of war.

I feel lucky to be alive. One day, my team was heading south on a one-lane country road when we

met a mine-clearing team heading north. We joked, "You guys should turn around because we've just driven 15 miles down this road with no problem." When they got about 150 yards past us, we heard a tremendous explosion. We went back and found the driver had been killed and there was a six-foot crater in the road. Somehow, the bomb hadn't detonated when we drove over it.

*DAWSON: After your Vietnam service, you did your residency at Henry Ford Hospital in Detroit. Tell us about that.*

KELLY: I had excellent teachers at the Henry Ford Hospital, and the experience confirmed that I had made the right choice of specialty. I completed the program in 1971 and became board-certified. Then, instead of setting up a practice, I went straight into academic medicine by then, we had a new baby girl, and my wife was studying for a PhD in sociology at Harvard, so I returned to Brown University School of Medicine as a teaching and research fellow. I worked under Dr. Charles McDonald, the first African American to head a dermatology department at a predominately white medical school in the United States. During this time, I passed my board examination in dermatopathology, and in 1972, I was appointed director of Dermatology Resident Education at Brown. While there, I saw many patients with various skin conditions, which was the beginning of my interest in skin diseases in people of color.

*DAWSON: What are your views on federal healthcare insurance programs, such as Medicare and Medicaid?*

KELLY: Medical care should be a guaranteed human right. If the United States can spend billions of dollars on a war in Iraq, it certainly should be able to provide adequate healthcare for all of our citizens. Medicare and Medicaid have given the poor and elderly, for so long the victims of death and disability from largely manageable conditions, access to healthcare. But there are well over 40 million other Americans who are uninsured. This country needs to commit to making healthcare for all a priority.

*DAWSON: What are your opinions on abortion, assisted suicide, and human cloning?*

KELLY: The right to life and the right to die are complicated subjects with many pros and cons. These are difficult issues for our society to regulate. I am pro-choice on all three issues. On the question of abortion, I feel a woman has the right to decide whether or not to carry a pregnancy to full term. As far as assisted suicide is concerned, any person who

has uncontrollable pain from an irreversible illness or who is debilitated and unable to care for himself, with no hope of ever getting better, should have the option of assisted suicide. As for human cloning, from a therapeutic perspective, it provides hope of cures for people with spinal injuries, genetic diseases and many other health concerns.

*DAWSON: In your years of practice, is there any particular episode or event that sticks out in your mind?*

KELLY: Once an African-American patient came to my office for evaluation of a keloid. A keloid is a condition in which scars form excessive unsightly growths during the healing period. It largely afflicts persons with dark complexions. Anyway, we evaluated his case and gave him the therapeutic options. We told him that if surgery was involved, we could not guarantee the results that the growth might return even larger. His response was "Since you people at King don't know what you are doing, I'm going to UCLA. I've got money and can see the best." About three weeks later, he was back because the doctors at UCLA told him the best person to see for keloids was Dr. Kelly at King Hospital.

This event was instructive for me and hopefully for the patient. It showed me the continued doubt some in the African-American community have about the expertise of our own professional class. It also showed me the respect for my abilities and expertise as a dermatologist that my colleagues across town had for our program and me. And it gave me great pride that King/Drew Medical Center provided me the opportunity to develop this expertise.

*DAWSON: During your tenure as editor in chief of the Journal of the National Medical Association, what accomplishments gave you most pride?*

KELLY: I'm very proud that we have maintained a policy of peer review of submissions. *JNMA* has seen the quadrupling of manuscripts submitted. Advertising revenue also has increased dramatically, and the journal's reading rank has risen to 89th from being ranked at the 200th level. And now we produce many more supplements per year that focus on specific disease entities.

I couldn't have done it alone. The people I've worked with at the National Medical Association's office in Washington DC—such as Kimberly Taylor and Angela Speight, to name two among many—and

in Los Angeles, Audrey Hurt-Cole, have been second to none. Their dedication and competence have been evident in the results we have achieved as a team.

*DAWSON: What advice would you give new doctors?*

KELLY: Follow your interests and your life, as physicians will be fulfilling. For example, academic medicine has brought me many unquantifiable perks, such as international travel for meetings and lecturing in my specialty, the opportunity to move into uncharted areas of research on skin diseases in people of color, and especially the rejuvenation that comes from working with young doctors and medical students and having to stay on the cutting edge of treatment and research. So, my advice is: Do what you love, and everything else will fall into place. It's worked for me.

I would also advise new doctors always to strive for a balance between the demands of a career in medicine, family, friendships, and their community.

*DAWSON: Any advice for the NMA as an organization?*

KELLY: The NMA must continue to be the standard bearer for health and health-related issues for the African-American community and other medically underserved groups. We must continue to provide seminal information that is of special interest to our community. At the same time, the *Journal of the National Medical Association* must provide updated information on patient care and pertinent scientific and clinical research. In addition, the NMA must continue to point out social and political causes of healthcare disparities. In these ways, the NMA will continue to serve our constituency as well as the wider medical community.

*DAWSON: Thank you for your time.*

KELLY: It was a pleasure to have the opportunity to share my thoughts with you. My years as the editor in chief of *JNMA* have been very rewarding. ■

### We Welcome Your Comments

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